

BEST AVAILABLE COPY

MULTIPLE DEPENDENT CLAIMS  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1			
2				1		
3				1		
4				1		
5				1		
6				2		
7				1		
8				2		
9				2		
10				1		
11				1		
12				2		
13				1		
14				1		
15				1		
16				1		
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31				1		
32				1		
33				2		
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38				1		
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45						
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49						
50						
TOTAL IND.	1		1			
TOTAL DEP.		45		47		
TOTAL CLAIMS	46		48			

	IND.		DEP.		IND.		DEP.	
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